Happitots Day Nursery - Baillieston
Day Care of Children

145 Swinton Road
Baillieston
Glasgow
G69 6DW

Telephone: 01417 712 836

Type of inspection:
Unannounced

Completed on:
8 April 2025

Service provided by:
Bertram Nurseries Limited

Service provider number:
SP2003002955

Service no:
CS2003005983

About the service

Happitots Day Nursery - Baillieston is registered to provide care to a maximum of 79 children aged from birth to those not yet attending primary school. This includes; 15 children from birth to under two years; nine children aged 18 months to under two years; 15 children aged two years to three years and 40 children aged three years to those not yet attending primary school. There are currently 108 children registered at the service with varied patterns of attendance. Forty five children were present on the first day of inspection.

Care is provided from a detached villa over two levels, across five playrooms. Older children are cared for on the first level and babies are cared for in the outbuilding at the back of the property. Children also had access to enclosed gardens. The service is located within a residential area of Baillieston, Glasgow and is situated close to shops, transport links and other amenities.

About the inspection

This was an unannounced inspection which took place on 8 and 9 April 2025 between 08:45 and 16:00. The inspection was carried out by two inspectors from the Care Inspectorate. To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection. As part of this inspection we undertook a focus area. We have gathered specific information to help us understand more about how services support children's safety, wellbeing and engagement in their play and learning. This included reviewing the following aspects:

- staff deployment
- safety of the physical environment, indoors and outdoors
- the quality of personal plans and how well children's needs are being met
- children's engagement with the experiences provided in their setting.

This information will be anonymised and analysed to help inform our future work with services.

In making our evaluations of the service we:

- spoke with children using the service
- received feedback from 14 of their family members
- spoke with staff and management
- observed practice and daily life
- reviewed documents.

Key messages

- Children were happy, settled and confident within the setting.
- Children experienced warm and caring interactions, helping them feel loved, safe and secure.
- Mealtimes had been improved, supporting children's choices and independence. This should continue to be reviewed.
- Personal plans had been updated to help gather relevant information to meet children's care, support and learning needs. These should continue to be developed to ensure they help identify children's progress and next steps.
- Children benefited from access to outdoor play spaces, supporting their physical development and wellbeing.
- Considerable improvements had been made to the environment, which helped create welcoming and comfortable play spaces for children.
- Quality assurance processes had been strengthened which promoted positive outcomes for children.
- Staff should continue to be supported to develop their knowledge and skills to support them in their role to provide high quality care, play and learning.

From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

How good is our care, play and learning?	4 - Good
How good is our setting?	4 - Good
How good is our leadership?	4 - Good
How good is our staff team?	4 - Good

Further details on the particular areas inspected are provided at the end of this report.

How good is our care, play and learning? 4 - Good

We evaluated this key question as good, where several strengths impacted positively on outcomes for children and clearly outweighed areas for improvement.

Quality indicator: 1.1 Nurturing care and support.

Children were settled, happy and comfortable in the setting. Many children were confident chatting to inspectors and were comfortable asking questions. Children experienced kind and caring interactions from staff, helping them feel loved, safe and secure. Many parents told us staff were friendly and kind. Comments included "my child loves the staff", "staff are friendly and caring, my child enjoys going and feel [they] are supported well in [their] development" and "the staff are lovely my little one loves going in and they are well looked after."

Staff knew children's individual needs well and important Information was recorded in personal plans. These had recently been updated onto a new format, which helped ensure relevant information was gathered to help meet their needs. This captured children's thoughts and ideas, helping to respect their rights and voice. Parents commented, "I recently filled in a new plan, which is more in line with [their] age than the last one which was done as a baby", "every parents night we review the plan" and "the staff are keen to support any development areas we wish to work on with our child."

Some plans were still in the process of being updated and reviewed with families. We discussed where improvements were still needed to help ensure learning targets and progress was recorded. The manager agreed this would be part of the services improvement journey. We suggested developing approaches to embedding Getting it right for every child (GIRFEC) wellbeing indicators to support discussion, reflections and recording information.

Children had their nappy changed in response to their needs. Staff interacted warmly, helping ensure this was a nurturing experience. We discussed that to further support children flexibility for nappy changing rotas could be considered. This would help ensure a more individual approach to promote children's wellbeing.

Children mostly experienced relaxing and social mealtimes. A rolling lunch had been introduced for older children, which offered a more flexible approach. Opportunities for self-serving supported their independence, choices and wishes. Staff were in the early stages of evaluating this change. As part of this, staff should consider the transition to mealtimes so the interruption to children's play is minimised. For example, maximising the use of other play spaces during this time. Staff sat with children which helped support their language development. Babies and toddlers were encouraged to feed themselves supporting their self-help skills. We suggested reviewing the use of background music as this could distract children from focusing on speech sounds. A responsive approach by staff meant children were supported to leave the table when they had finished eating.

Menus had recently been reviewed in consultation with children and families. Children could choose from two choices on the menu each day. This met children's preferences and dietary requirements. If children did not like the meal, they were offered an alternative, helping ensure they were not hungry. Staff should support children to manage portion sizes when serving foods and to meet different needs and appetites. Some children had larger plates of food, which could put some children off eating. Milk and water was

available throughout the session, including outdoors, helping ensure children were kept hydrated. Two parents told us, "the nursery provides a great variety of foods for meals and snacks" and "good menu options. Staff encourage my child to try new foods."

Sleep spaces had been improved, which provided comfortable spaces for rest and naps. Children's wellbeing was promoted through sensitive arrangements for sleeping. Staff understood the importance of sleep and had participated in safe sleep training, helping ensure children were kept safe. Staff recognised babies cues when they were tired and they were able to sleep when needed. Transitions to sleep were calm and children were given time to fully awake before returning to play, supporting their wellbeing.

Suitable systems were in place for the safe administration of medication. Medicines were stored within playrooms and could be accessed quickly when needed. Staff recorded clear signs and symptoms of health needs. This was reviewed regularly with families and helped ensure and changes were updated, reflecting children's current needs, supporting children's wellbeing.

Quality indicator: 1.3 play and learning.

Children had access to a wide variety of play materials that met their needs. For example, the home area, construction and building, small world, and arts and crafts. Children told us they particularly liked playing with play dough and outdoors. Play spaces had been developed and organised better since the last inspection. These provided inviting and comfortable areas, which supported children's engagement. One parent told us, "they make things, and they've added some new things to play with."

Children had been consulted about changes to play spaces and materials. They were excited to tell us about their new basketball hoop in the garden. This helped ensure children's voice was valued, helping them feel like they matter. Children told us, "I like the basketball", "I like everything about it (nursery)" and "I like outside the best."

New systems were in place to support older children to make choices about outdoor play using visual reminders on a wall display. We suggested this should be embedded further in practice to support children accessing the garden more flexibility. Younger children were taken out in small groups. However, this was challenging when other children wished to go out and join them. Staff should consider how to help improve access to ensure children do not need to wait. Some children were only out for a short period, which was not enough time to engage in play. A few families commented that children mostly go out in better weather. We made an area for improvement at the last inspection and this has been reworded to reflect progress. The manager should continue to review routines and transitions to outdoors to ensure this is more accessible to children. (See area for improvement 1.)

Children's language and numeracy skills were developed through playing tabletop games with staff and other children. This supported them to count and recognise numbers. Opportunities for mark making were available in the creative area and through drawing materials outdoors. We discussed where this could be enhanced further by adding more mark making and literacy opportunities throughout the play spaces.

Staff played with children and sat at their level. This supported them to have fun and facilitated their engagement. Babies were supported to develop their language by repeating words and phrases as staff role modelled by commenting on what they were doing. For example, 'shake, shake, shake' and '1,2,3'. Babies laughed as staff supported them to build towers and knock them down. Staff would benefit from training opportunities to help build their knowledge and extend children's play ideas further.

Approaches to planning was variable in each room. The manager was aware of this and had plans to

develop this across the service to meet the needs of all children. This included supporting staff to develop their skills and knowledge through training. We discussed how planning could be strengthened. Ensuring children's needs and interests were recorded should help to inform planning and next steps. Online systems were in place to share children's play experiences with parents. However, the manager recognises more work needs to be done to develop the quality of observations and documentation of learning.

Children benefitted from access to the wider community. This included, walks in the area, play parks and visits to the library. This supported children develop awareness of the world around them. One parent told us, "[my child] likes to go on walks & trips to the park or Morrisons, likes baking and making stuff as well as playing in the garden."

Areas for improvement

1. To support children's wellbeing, learning and development, the provider should improve play opportunities. This should include, but is not limited to, reviewing daily routines, developing staff skills and knowledge on child development and ensuring children have flexible access to outdoor play.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'As a child, my social and physical skills, confidence, self-esteem and creativity are developed through a balance of organised and freely chosen extended play, including using open ended and natural materials' (HSCS 1.31) and 'As a child, I can direct my own play and activities in the way that I choose, and freely access a wide range of experiences and resources suitable for my age and stage, which stimulate my natural curiosity, learning and creativity' (HSCS 2.27).

How good is our setting? 4 - Good

Quality indicator: Children experience high quality facilities.

Play spaces were bright, warm and welcoming for children and families. Considerable improvements had been made to the setting since the last inspection, which provided more homely and clean spaces for children. This included, replacing old and worn furniture with new tables, chairs and storage units. Play materials and soft furnishings had been updated and wall displays had been refreshed. This created a more homely feel throughout the service which supported children's wellbeing. In addition, soft furnishings, materials and sofas helped create cosy spaces for children to relax in. This helped children feel like they matter.

Children accessed play spaces that met their needs, interests and stage of development. Materials were well organised to ensure they were accessible to children, helping support their choices and wishes. For example, tables, chairs and furniture that was different heights for the age groups of children. Storage units contained interesting materials which support curiosity and discovery. Interesting materials for babies supported them to make connections in their brains, problem solve and ignite curiosity. For example, metal balls, loose material and musical instruments.

Children's wellbeing was supported through access to outdoor play spaces. Children enjoyed climbing, running, riding bikes and playing basketball. Babies used a small ramp to access outdoors easily, which helped develop their crawling and independence skills. We discussed with staff how a review of the play materials in some areas could help reduce minor conflict over the spaces. For example, the bikes were overlapping in the space with children that wished to play with the basketball. Outdoors could be further enhanced with increased opportunities for open-ended play using loose parts. This type of play involves

using open-ended, non-prescriptive materials that children can manipulate and combine in various ways. This fosters creativity, problem-solving, and imaginative play.

A variety of measures were in place to help keep children safe. This included, a secure entrance, internal safety gates and safe storage of hazardous materials. In addition, we visited on a very warm day and children had sun cream applied to help protect their skin from sun exposure. All parents that provided feedback felt that the service was safe and secure for children. We discussed where further consideration should be given to creating shelters in the garden to provided shaded areas.

Many repairs have been undertaken since the last inspection. This included, replacing the kitchen window and repositioning the flu for the heating system. The service had a few repairs awaiting completion, this included adding a vent to the sensory room and replacing fence panels in the garden. A new online system was in place for reporting maintenance issues. This helped ensure faults or repairs were reported quickly and helped track action taken, creating a safe space for children.

Some infection prevention and control measures were in place to support children's wellbeing. This included the use of gloves and aprons when changing nappies and regular cleaning of surfaces and floors. The service could consider adding a high handwashing sink in the toddler room to make hand washing facilities more suitable for staff.

How good is our leadership? 4 - Good

We evaluated this key question as good, where several strengths impacted positively on outcomes for children and clearly outweighed areas for improvement.

Quality Indicator: 3.1 Quality assurance and improvement well led.

Since the last inspection there have been changes to the staff team, including a new manager. They have taken time to get to know children and families. A vision was in place that reflected the wider organisation. This included putting children first every time and having a fun filled environment. The leaders had been working hard to ensure this was reflected across the service. In addition, they plan to engage families and children so their aspirations are reflected within their vision and values. This will help families feel valued and contribute towards a vision that is unique to this setting.

Parent received communication through a variety of ways. This included, newsletters, text message and through online systems. Managers valued parents' input and had strengthened their approach to gathering feedback. This included, drop-in sessions, questionnaires, focus groups and parents' meetings. This will support families to feel connected to the service. Recently they had been involved in reviewing the lunch menu to help ensure this met the needs of children. Families welcomed this and many told us they preferred the new menu. Two parents told us they were "involved in surveys from the nursery manager" and "regular focus groups are held." However, a few parents told us they would like more communication about their child's learning and day. We shared this with the manager who told us they were reviewing the content of the online app to help improve consistency.

Leaders were committed and passionate in making improvements for children. Staff felt well supported in their role and this helped created a positive environment for children. Children views had been sought on the development of lunch time routines, helping respect their voice. Children commented that they liked serving food by themselves. Moving forward the service should continue to involve families and children. Their views should help inform development plans, to improve outcomes for children.

Leaders had developed a detailed action plan to address concerns raised at the last inspection. We found this had contributed to overall improvements within the setting, which supported positive outcomes for children. For example, lunch routines, play spaces, decor, furniture and auditing and monitoring of the service. One parent told us, "think since the failed assessment, concerns have been listened to." As a result, children experienced an improved quality of service that supported their wellbeing. The pace of change had supported staff to understand the reason for making changes and this had been shared with families. Moving forward the manager should develop approaches to self-evaluation. To help bring about positive change, staff should be encouraged to reflect and evaluate their practice against best practice guidance.

How good is our staff team? 4 - Good

We evaluated this key question as good, where several strengths impacted positively on outcomes for children and clearly outweighed areas for improvement.

Quality indicator: 4.3 Staff deployment.

Staff were committed and happy in their role helping create a positive environment for children. There was a mix of skills and abilities across the service. Managers had given consideration to where they were best deployed to meet the needs of children. This was kept under review, helping to ensure staff continue to develop their skills and knowledge.

A few new members of staff had been recruited and as a result there had been changes to staff working within each playroom. They had received an induction and were supported by mentors to develop their skills and knowledge in the role. A staff information board was available at the entrance to the building and at each playroom. This supported parents to know who was caring for their child. Leaders ensured that there was familiar staff caring for children across the day, which supported their wellbeing. Parents told they liked "the nurture from the staff", "myself and my child have a great positive relationship with most of the staff that care for [them]" and "they know my child well, they're friendly and personable."

Staff absences were managed carefully to help minimise disruption to children's care. Rotas were in place which supported staff to have breaks and rest during the day. Children were supported at these times by staff that knew them well. When supply staff were needed, they were known to children helping provide familiarity. We suggested reviewing times of staff lunch breaks in the older playroom whilst adjusting to new lunch routines. Staff went for a break as lunch was being served and this was a busy time. More staff during this time would help support children's engagement in play experiences.

Staff communicated well with each other as a team and if a task took them away from their role. Walkies talkies had recently been introduced to help ensure staff can communicate across the rooms and when outdoors. This could be utilised further to help ensure staff share information and support children access the garden, or come inside when they wish to do so.

Staff commented positively on the improvements of the environment and play spaces. They feel well supported in their personal development and welcomed training opportunities to support them in their role. In addition, leaders recognised staff achievements and provided feedback on this. Staff should continue to be supported in developing their skills and knowledge to care for children and provide high quality play and learning.

What the service has done to meet any requirements we made at or since the last inspection

Requirements

Requirement 1

By 31 January 2025, the provider must ensure children receive cared in a clean, safe and well-maintained environment.

To do this, the provider must, at a minimum:

a) ensure furnishings and fixtures are well maintained
b) ensure play spaces are clean and tidy
c) ensure soft furnishings are replaced or laundered
d) remove unnecessary storage from toilets or nappy changing areas.

This is to comply with regulations 4(1)(a) and (b)(welfare of users) and 10(2)(d)(Fitness of premises) of the Social Care and Social Work Improvement Scotland (Requirements for care Services) Regulations 2011 (SSI 2011/ 210).

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I experience and environment that is well looked after with clean, tidy and well-maintained premises, furnishings and equipment' (HSCS 5.24) and 'I am able to access a range of good quality equipment and furnishings to meet my needs, wishes and choices' (HSCS 5.23)

This requirement was made on 18 November 2024.

Action taken on previous requirement
The service had made considerable improvements to the environment. This included replacing worn and dirty furnishings and fixtures, deep cleaning of play spaces and review of infection control practices to help minimise the potential spread of infection. Toilets and nappy changing areas were clean and tidy.

Met - within timescales

What the service has done to meet any areas for improvement we made at or since the last inspection

Areas for improvement

Previous area for improvement 1

To support children's wellbeing and development, the provider should review personal plans to ensure they set out how their individual needs will be met, as well as their wishes and choices. This should include, but

not be limited to, ensuring that personal plans are regularly reviewed with children and parents to ensure that information is up to date, to reflect children's current needs, wishes and choices.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: 'My personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices' (HSCS 1.15).

This area for improvement was made on 18 November 2024.

Action taken since then

Personal plans were in place and children's information had been updated which gathered important information about their needs. This included medical needs, and likes and dislikes. Children were consulted and their comments recorded, valuing their voice. Not all children had the 'being me' part completed as this was still a transition period and staff were working towards this. The manager provided assurances this would be kept under review. **Therefore, this area for improvement has been met.**

Previous area for improvement 2

To promote children's wellbeing and ensure they have a relaxing and sociable eating experience, the provider should improve mealtime experiences. This should include but not be limited to, reviewing mealtime routines and improve staff interactions to promote a calm and social experience.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: 'I can enjoy unhurried mealtimes in as relaxed an atmosphere as possible' (HSCS 1.35).

This area for improvement was made on 18 November 2024.

Action taken since then

Children mostly experienced a relaxing and sociable mealtime. A rolling lunch had been developed for the older children. Children were encouraged to self-serve promoting their independence skills. Staff sat with children, helping to provide a sociable experience. Staff plan to continue to develop this further. **Therefore, this area for improvement has been met.**

Previous area for improvement 3

To support children's wellbeing, learning and development, the provider should improve play experiences. This should include, but is not limited to, reviewing daily routines, developing staff skills and knowledge on child development and ensuring resources support curiosity, discovery and creativity.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'As a child, my social and physical skills, confidence, self-esteem and creativity are developed through a balance of organised and freely chosen extended play, including using open ended and natural materials' (HSCS 1.31) and 'As a child, I can direct my own play and activities in the way that I choose, and freely access a wide range of experiences and resources suitable for my age and stage, which stimulate my natural curiosity, learning and creativity' (HSCS 2.27).

This area for improvement was made on 18 November 2024.

Action taken since then

Play spaces had been reviewed and these were organised well for children. The resources met children's interest and age and stage of development. However, whilst some routines had improved, we suggested more consideration could be given to access to outdoor play and for supporting children's play choices over

the lunch period. **Therefore, this area for improvement has not been met and will be continued. It has been reworded to reflect progress.**

Previous area for improvement 4

To support children's wellbeing the provider should ensure that they access relaxing, peaceful and welcoming play spaces. This should include, but is not limited to, providing a good range of high-quality toys and materials to meet their needs and reviewing noise levels and wall displays to ensure they are not overstimulating.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'My environment is relaxed, welcoming, peaceful and free from avoidable and intrusive noise and smells' (HSCS 5.20); and 'I am able to access a range of good quality equipment and furnishings to meet my needs, wishes and choices' (HSCS 5.23).

This area for improvement was made on 18 November 2024.

Action taken since then

Considerable improvements had been made to improve the setting. This included the addition of new resources, furniture and soft furnishings. Wall displays had been refreshed with more neutral colours, creating homely and welcoming spaces. Whilst the service were still working on some improvements, we were satisfied with the progress that had been made. **Therefore, this area for improvement has been met.**

Previous area for improvement 5

To ensure that children's health, wellbeing and privacy is protected the provider should improve nappy changing facilities.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: 'If I require intimate personal care, this is carried out in a dignified way, with my privacy and personal preferences respected' (HSCS 1.4); and 'If I require intimate personal care, there is a suitable area for this, including a sink if needed' (HSCS 5.4).

This area for improvement was made on 18 November 2024.

Action taken since then

We found all changing areas and toilets to be clean and tidy. A new changing area had been installed for children in the toddler room. However, improvements to the baby room facilities had not yet been actioned. **Therefore, this area for improvement will be continued.**

Previous area for improvement 6

To support children's wellbeing, learning and development, the provider should ensure that quality assurance processes are improved and impact positively on outcomes for children and families. This should include, but is not limited to identifying and prioritising improvements needed and how they will be achieved, and ensuring they monitor the quality of provision across the service.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19) and 'I use a service and organisation that are well led and managed' (HSCS 4.23).

This area for improvement was made on 18 November 2024.

Action taken since then

Leaders and staff were working together to make positive changes for children. A detailed action plan was in place to address the concerns which were identified at the last inspection. Good progress has been made which has had a positive impact on outcomes for children. Managers should now further develop approaches to self-evaluation to move forward and inform future development plans. **Therefore, this area for improvement has been met.**

Previous area for improvement 7

To support children's care, play and learning, the provider should ensure staff are skilled and competent to support meeting the needs of the children. This should include but not be limited to ensuring staff receive relevant training to support them in their role.

This is to ensure that care and support is consistent with Health and Social Care Standards (HSCS) which state: 'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes' (HSCS 3.14).

This area for improvement was made on 18 November 2024.

Action taken since then

The manager revisited induction processes and best practice guidance with staff to help provide a consistent approach across the service. This included reviewing policies, health and safety and measures to help promote infection prevention and control.

Staff have participated in training to support them in their role to provide care and keep children safe. For example, first aid, safe sleep and child protection. Plans were in place for further training to support staff develop their understanding of curriculum and planning. This will help staff to develop confidence and skills to provide high quality play.

Staff have commented positively on the progress. They told us staff communicate well together, and they feel valued. This has motivated them to learn and develop. **Therefore, this area for improvement has been met.**

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Detailed evaluations

How good is our care, play and learning?	4 - Good
1.1 Nurturing care and support	4 - Good
1.3 Play and learning	4 - Good

How good is our setting?	4 - Good
2.2 Children experience high quality facilities	4 - Good

How good is our leadership?	4 - Good
3.1 Quality assurance and improvement are led well	4 - Good

How good is our staff team?	4 - Good
4.3 Staff deployment	4 - Good

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